Guidelines for OVHA Coverage

Item: Transfer boards and other transfer devices.

Definition: A transfer device enables a beneficiary to move between surfaces, for example from bed to chair, or bed to commode, or chair to commode. A transfer device is not meant to transport a beneficiary (for example from one room to another). Lifts are a specific category of transfer device that elevates an individual off one surface to another; please see Lift guidelines for specifics.

Guidelines: Transfer devices may be appropriate when:

- Beneficiary has a medical condition that impairs the ability to transfer from one surface to another AND
- Beneficiary has been evaluated for the most appropriate transfer techniques and devices by a physical or occupational therapist, or a physician knowledgeable in transfer techniques and devices AND
- The device has been prescribed by a physician active with VT Medicaid AND
- The device prescribed is the least expensive, medically necessary device that is appropriate to the beneficiary's medical condition AND
- The device prescribed maximizes beneficiary independence AND
- Beneficiary and/or caregivers have been fully trained in the proper technique for use of the device.

Applicable Codes:

E0972 Wheelchair accessory, transfer board or device, each.

E1399 Durable medical equipment, miscellaneous. This code should be used for devices which are not wheelchair transfer boards, such as pivot discs, stand pivot devices, low friction sliding sheets/tubes.

Cautions: Transfers are a risk-intensive task that can result in beneficiary and caregiver injury without appropriate training and the appropriate device. Caregiver injury can result in increased need for care, including institutionalization. Therefore, it is very important that a comprehensive evaluation be performed, appropriate equipment trialled, and appropriate training be provided.

Examples of Diagnosis: Cerebral palsy, quadriplegia, paraplegia, multiple sclerosis, stroke, muscular dystrophy, arthritis.

Required Documentation:

- Current, complete Certificate of Medical Necessity AND
- Supporting documentation demonstrating that the beneficiary has a medical
 condition that impairs the ability to transfer from one surface to another that the
 beneficiary has been evaluated for the most appropriate transfer techniques and
 devices by a physical or occupational therapist, or a physician knowledgeable in
 transfer techniques and devices AND the device prescribed is the least expensive,
 medically necessary device that is appropriate to the beneficiary's medical
 condition AND the device prescribed maximizes beneficiary independence AND

that the beneficiary and/or caregivers have been fully trained in the proper technique for use of the device.

References:

Patient Care Lifting Guidelines, Appendix B, Ergonomics Program. University of Rochester. www.satfety.rochester.edu.

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Johnsson C et al. Evaluation of training in patient handling and moving skills among hlepital and home care personnel. Ergonomics. 2002 Oct 10;45(12):850-65.

Silvia CE et al. An ergonomic comparison between mechanical and manual patient transfer techniques. Worl. 2002;19(1):19-34.

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EasyPivot Patient Lifts. Rand-Scott Corporation. www.easypivot.com.

Patient Care: Transfer Devices. Allegro Medical. www.allegromedical.com.

One Way Shaped Roller Sheets, Bridger Facility, Shaped Flat Slide Sheets. Phil-E-Slide . www.phil-e-slide-us.com.